**Critical Home Repair Program Application**

Habitat Montco’s Critical Home Repair Program provides low-cost home repairs to residents of Montgomery County. Repairs must address critical needs in a home that threaten health, safety, security and/or accessibility. Habitat Montco’s program focuses on serving low-income resident who are 65 and over, disabled, and veteran homeowners who are struggling to maintain their homes. Through this program, Habitat Montco aims to stabilize communities, address Montgomery County’s aging housing stock, and prevent low-income homeowners from being displaced.

**There are three major criteria for selection in Habitat Montco’s CHR Program:**

1. **Need:** The homeowner(s) must be unable to afford and/or perform the repairs themselves, the total household income must fall below 80% of the median household income of Montgomery County households of the same size.
2. **Ability to pay:** The homeowner(s) must be willing to contribute to a small percentage of repair costs. This payment is not intended to be a burden to the family, but rather to signify a willingness to partner. Payment is calculated on a sliding scale based on percentage of area median income. \*
3. **Willingness to partner with HFHMC:** Homeowner(s) must provide copies of all required documentation, be honest and cooperative with HFHMC, and complete sweat equity hours as physically able to do so. Sweat equity consists of homeowner(s) working alongside volunteers on their own home repairs, working in the ReStore or Habitat Montco office. Specific sweat equity activities are decided by HFHMC staff and will be fitting to the homeowner’s capabilities.

**Qualified applicants must:**

* Own and reside in a home that is in need of repairs within Montgomery County, PA
* Have homeowner’s insurance and be current on all mortgage and property tax payments
* Have a total household income less than 80%, but more than 20%, of the median income for Montgomery County households of like size
* Be willing to partner with Habitat Montco through the contribution of sweat equity toward the completion of their home repairs, agree to a well-defined scope of work contract for requested repairs, agree to a media release of their story, photos, etc. for HFHMC promotional purposes, and last agree to a feasible payment for their repairs
* Understand that this is NOT an emergency repair program; the application process and completion of repairs could take up to one year
* Understand many repairs are completed by HFHMC’s dedicated volunteers

**Documents required of each person listed on the deed or mortgage:**

* Current, consecutive pay stubs from the last 3 months for each job listed in section 6 of the application
* Most recent bank statements for the last 3 months for all accounts held by adult members of the household
* Copy of the deed or most recent mortgage receipt or statement
* Proof of any additional income (AFDC/TANF, Food Stamps, Social Security, Pension, 401K distributions, SSI, Disability, Alimony, Child Support etc. (listed in section 6 of application))
* Copies of previous TWO year’s tax returns (W2s alone are NOT acceptable)
* Proof of homeowner’s insurance
* Two forms of ID, one must be a photo ID
* VETERANS ONLY: Proof of military service (DD214 or copy of VA card)

**Habitat MontCo Median Income Guidelines**

|  |  |  |
| --- | --- | --- |
| ***Household***  ***Size*** | ***Maximum***  ***Income*** | ***Maximum Monthly Income*** |
| One Person | $44,968 | $3,753 |
| Two Persons | $51,392 | $4,287 |
| Three Persons | $57,816 | $4,820 |
| Four Persons | $64,240 | $5,353 |
| Five Persons | $69,379 | $5,787 |
| Six Persons | $74,518 | $6,213 |
| Seven Persons | $79,658 | $6,640 |
| Eight Persons | $84,797 | $7,067 |

*Updated per HUD requirements – 1/26/2017*

**How to turn in your application**

1. Fill out pages 3-7 of this application.
2. Make sure all required documents are attached.
3. If you have any questions, please contact us. Contact information is listed below.
4. Mail, fax, email, or drop off your application to address listed below.
5. Applications are reviewed by a committee of qualified staff and volunteers to determine eligibility. If you are deemed eligible for our program, you will be contacted, and a home visit will be scheduled.

Attn: Family Services

Habitat for Humanity of Montgomery County, PA

533 Foundry Road West Norriton, PA 19403





Phone: 610-278-7710 Ext. 107

Fax: 610-278-1634

Email: [schettri@habitatmontco.org](mailto:schettri@habitatmontco.org)

**Initial Home Repair Guidelines**

Once your application has been reviewed and it is determined that you qualify for Habitat Montco’s programs, Habitat Montco will set up an initial home visit to begin to create a scope of work. However, if the safety of our staff and volunteers may be compromised in the home we will not complete the home visit and remove your application from our applicant pool until remediation of the safety concerns has occurred. Safety concerns include, but are not limited to:

• Any hoarding activities. Hoarding is defined as the acquisition of, and failure to discard a large number of possessions or large amounts of newspapers, magazine or other accumulated items, which may be present in or around a residence.

• The presence or consumption of drugs or alcohol while staff and/or volunteers are in the home, or in general.

• The presence of guns or other weapons left in the open.

• More than 8 uncaged pets living in the home. Pets being defined as any domesticated animal.

• The presence of mold. If mold is found in a home during a home visit Habitat for Humanity reserves the right to leave the home. Mold can create serious health and air quality issues if not treated.

• Structural damage that threatens the integrity of the home's building infrastructure. These damages can include cracks and breaks in the foundation or compromised floors.

• Severe infestation of any sort including, but not limited to, bed bugs, cockroaches, or rodents of any kind.

If any of these or other situations are present at your home and risk the safety of Habitat Montco staff and volunteers, Habitat Montco reserves the right to refuse or leave a home visit at any time. If any of these conditions exist in your home, Habitat Montco is happy to recommend resources that can help. Once Habitat Montco has received proof that the situation has been rectified, you will be allowed to resubmit your application during the following application period for the program.

Please also remove or cover up inappropriate or obscene materials and decorations when staff and volunteers are present in your home. During the review process, the construction team will inform you of what Habitat Montco considers inappropriate.

I/We agree to comply with the above conditions if a home visit is completed by Habitat Montco. It is not a promise or guarantee that work will be completed. By signing you are acknowledging the fact that Habitat Montco reserves the right to withdraw any application at any time.

Applicant Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_

**Home Repair Application: please complete this application in blue or black ink.**

1. Applicant Information (please print clearly)

Name:

Address: City: Zip Code:

Phone: Alt Phone: Email:

List all people, including yourself, for whom the above address is their permanent residence:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name** | **Relationship** | **Age** | **Employed (Y/N)** | |
|  | (self) |  | * Yes | * No |
|  |  |  | * Yes | * No |
|  |  |  | * Yes | * No |
|  |  |  | * Yes | * No |
|  |  |  | * Yes | * No |
|  |  |  | * Yes | * No |
|  |  |  | * Yes | * No |
|  |  |  | * Yes | * No |

|  |  |
| --- | --- |
| * Yes | * No |
| * Yes | * No |
| * Yes | * No |

Is anyone listed above a Veteran? Name(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is anyone listed above disabled? Name(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is anyone listed 65 years old and over? Name(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Homeownership Information

Number of years at your current address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| □ | yes |  | □ | no |

Do you own and occupy this residence?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| □ | yes |  | □ | no |  |

Are you making mortgage payments?

If yes, what is your monthly mortgage payment? $\_\_\_\_\_\_\_\_ \_\_\_\_\_\_ per month

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| □ | yes |  | □ | no |

Do you possess a valid homeowner’s insurance policy on the property?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| □ | yes |  | □ | no |

Are you current on your property taxes and utilities?

If you answered “no” to the above, please explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| □ | yes |  | □ | no |

Are you in danger of losing your home?

If you answered “yes” to the above, please explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Willingness to partner

To be considered for Habitat for Humanity programs, you and your household must provide copies of all required documentation, be honest and cooperative with Habitat of Humanity, allow HFHMC access to your home for multiple repair assessments as needed, and preform a certain number of “sweat equity” hours working on your home, the homes of others and/or the Habitat office and ReStore. The kind of sweat equity will be determined by Habitat staff and will be fitting for the applicant.

**I AM WILLING TO PARTNER AND COMPLETE THE REQUIRED SWEAT-EQUITY HOURS**

Applicant’s Signature

1. Specific Repairs Needed

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| □ | yes |  | □ | no |

Are you requesting **roof repairs**?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| □ | Patching |  | □ | Replacement |

If roof repairs are needed, to what extent are repairs required?

To the best of your knowledge, how old is your current roof and has it ever been replaced? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you are requesting roof repairs please explain, in detail, the specific issues and repairs needed.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| □ | yes |  | □ | no |

Are you requesting **heating repairs**?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| □ | Maintenance |  | □ | Replacement |

If heating repairs are needed, to what extent are the repairs required?

To the best of your knowledge, how old is your current heater? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you are requesting heating repairs please explain, in detail, the specific issues and repairs needed.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Additional Repairs

Briefly describe the work that you need done on your home. You may attach a separate piece of paper if necessary. Remember that the items you list will be considered for repair, but the final decision on what work can be performed will be made by the staff of Habitat Montco, based on compromised safety, security and/or health issues. Please only list repairs that you feel like are vital to the safety or wellbeing of yourself and your family. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Need For Repairs

Please describe why you have decided to reach out to Habitat Montco to have these repairs completed.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Current Income

Please list all jobs currently held by all adult members of your household

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name** | **Employer** | **Start Date** | **Pre-Tax Pay** | **Per (circle one)** |
|  |  |  |  | Week biweekly twice a month monthly |
|  |  |  |  | Week biweekly twice a month monthly |
|  |  |  |  | Week biweekly twice a month monthly |
|  |  |  |  | Week biweekly twice a month monthly |
|  |  |  |  | Week biweekly twice a month monthly |
|  |  |  |  | Week biweekly twice a month monthly |
|  |  |  |  | Week biweekly twice a month monthly |
|  |  |  |  | Week biweekly twice a month monthly |

Please list all Income received other than employment

|  |  |
| --- | --- |
| **Type of income** | **Amount received per month** |
| AFDC/TANF | $ |
| SNAP | $ |
| Child Support | $ |
| Disability (SSDI) | $ |
| SSI | $ |
| Social Security/ Retirement/ Pension | $ |
| Alimony | $ |
| Other (specify) | $ |
| Other (specify) | $ |
| Other (specify) | $ |

1. Debt

Please list all of your debt including: loans, car payments, medical bills, credit cards, child support, student loans, and any business or store accounts (Macy’s, Best Buy etc.). List any existing debt regardless of whether you are currently making payments. Please not that high levels of accumulated debt will not be counted against you during the application process. For this reason it is important to correctly report current debt as it is required for the HFHMC staff to accurately gauge your application.

|  |  |  |  |
| --- | --- | --- | --- |
| Company Name | Type of debt | Minimum monthly payment | Balance Remaining |
|  |  | $ | $ |
|  |  | $ | $ |
|  |  | $ | $ |
|  |  | $ | $ |
|  |  | $ | $ |
|  |  | $ | $ |
|  |  | $ | $ |

1. Checklist

The following is a list of information which must be received to complete your application with Habitat for Humanity of Montgomery County, PA. We cannot process an application unless we receive ALL of the information listed below. Incomplete applications will be automatically rejected. If you need assistance completing your application, please contact our office, and we will be happy to answer any questions. Please do not give us originals of your personal documents, as we may not be able to return them to you.

All applications must have all documents listed with the following expectations only:

* Pay stubs are only required for applicants who are currently employed, or who have household members who are currently employed
* Proof of additional income is only required for households who are receiving additional benefits
* Proof of military service is only required for applicants with veteran status

All other attachments are required without any exception. Failure to do so will result in automatic withdraw of your application and could potentially damage your opportunity to for any future assistance from Habitat Montco.

**Required Application Attachments: Check box when attached**

* **Current, consecutive pay stubs from the last 3 months for each job listed in section 6**
* **Most recent bank statements for the past 3 months for all accounts held by adult members of the household**
* **Copy of the deed or most recent mortgage receipt or statement**
* **Proof of any additional income (AFDC/TANF, Food Stamps, Social Security, SSI, Disability, Alimony, Child Support, etc.)**
* **Copies of previous TWO year’s tax returns (W2s alone are NOT acceptable)**
* **Proof of homeowner’s insurance**
* **Two forms of ID, one must be a photo ID**
* **VETERANS ONLY: Proof of military service (DD214 or copy of VA card)**

Authorization and Release

I understand that by filing this application, I am authorizing Habitat for Humanity of Montgomery County, PA to evaluate my actual need for home repairs, my ability to repay my share of the cost of the repairs and my willingness to be a partner family. I understand that the evaluation will include personal visits, a credit check and a criminal background check. I have answered all the questions on this application truthfully. I understand that if I have not answered all questions truthfully my application may be denied even if I have already been selected as a partner family and I may be disqualified from the program. The original copy of this application will be retained by Habitat for Humanity of Montgomery County even if the application is not approved.

Applicant Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_